2006-005

2060102

## RETIREMENT SYSTEM FINANCIAL DISCLOSURE REPORT

Pursuant to LSA-RS. 42:1114.2, each person who his or it seeding to obtain a contractual or other business or financial relationship with a state or statewide public retirement system shall like with the Board of Ethics a financial disclosure report armianneally if the person has made expenditures of five hundred dollars or more in a calendar year. Reports disclosing expenditures for retirement afficials must be filed by August 15th, covering January 1 through June 30 of the calendar year and by February 15th, covering Junery 1 - December 31 of the calendar year. Although there is no registration requirement under RS. 42:1114.2, you may be required to register and report under LSA-RIS. 49:71 et seq.

Reports may be resided or delivered to: Board of Ethics, 2415 Quail.Dr., 3rd Floor, Beton Rouge, LA 70808 OR

Especi to: (225)763-8787 or (225)763-8780

REPORT COVERING:	POR OFFICE USE ONLY
G JANUARY 1 through JUNE 30, DUE BY AUGUST 15	Postmerk Date:
G JANUARY 1 through DECEMBER 31, 2005 - DUE BY FEBRUARY 15	
1. Name: Galvin Kelly MI	
2. Business Address: 1000 W. Broadway Sandiggo (A 9210) Speet and No. City State Zip	
Mailing Address:	_
3. Business Phone: Z1Z-739-3348  Area Code and Telephone Number	
4. Employer: Nicholas applegate	
5. Employer's address: 600 W. Blowburn / San Diego Ch 98 Street and No. / City State Zi	<u> 2101</u> P
6. Did you make an expenditure exceeding \$50 on one occasion for a retirement system official:	
From January 1 through June 30?  From July 1 through December 31?  Yes  No  No  NA	<b>83</b> 83 83 83 83
If the answer to either question in Number 6 above is YES, complete Schedule A and attach.	E 4
7. Did you make expenditures exceeding the sum of \$250 for a ratirement system official:  ———————————————————————————————————	3 A 8
From January 1 through June 30?  From July 1 through December 31?  Yes No No NA	₹ 2
If the answer to either question in Number 7 above is YES, complete Schedule A and auach.	

8. PROVIDE BELOW (a) the name of the state or statewide public retirement system; (b) the aggregate total of all expenditures autibutable to the retirement system made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the retirement system made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the retirement system.

)	a. Name of Retirement System: Teachers' f.	eticement System of Lauisiana
	b. Total of all expenditures made January 1 through June 30:	s 22.28 _
	<ul> <li>Total of all expenditures made July 1 through December 3.</li> <li>(When applicable)</li> </ul>	
	d. Forsi of all expenditures made during the calendar year.	s_380. <u>68_</u>
<b>.</b>	n_ Name of Retirement System:	
<u>;</u> ] ·	E Name of Respendences Systems.	
	<ul> <li>b. Total of all expenditures made January 1 through June 30:</li> </ul>	5
	<ul> <li>c. Total of all expenditures made July 1 through December 3 (When applicable)</li> </ul>	l: \$
	d. Total of all expenditures made during the calendar year:	s
3)	a. Name of Retirement System:	
	b. Total of all expenditures made January 1 through June 30:	s
	<ul> <li>c. Total of all expenditures made July 1 through December 3 (When applicable)</li> </ul>	1: 5
	d. Total of all expenditures made during the calendar year:	\$

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and betief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 42:1114.2 has been deliberately omitted.

Kelly M Stalixie

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